



IFW

FEE TRANSMITTAL

For FY 2009

Complete if Known

<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27	Application Number	10/587,318
TOTAL AMOUNT OF PAYMENT \$	Filing Date	April 30, 2007
	First Named Inventor	Maruyama
	Examiner Name	Alexander Gilman
	Art Unit	2833
	Attorney Docket No.	A4-206 US

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify):

☒ Deposit Account Deposit Account Number: 50-1873 Deposit Account Name: Molex Incorporated

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, **except for the filing fee**

☒ Charge any addtl. fee(s) or underpayments under 37 CFR 1.16 and 1.17 and credit any overpayments.

FEE CALCULATION

1. Basic Filing, Search and Examination Fees				
	Filing Fees	Search Fees	Examination Fees	Fees Paid (\$)
Utility	\$330	\$540	\$210	\$
Design	\$220	\$100	\$130	\$
Plant	\$220	\$330	\$160	\$
Reissue	\$330	\$540	\$620	\$
Provisional	\$220	\$0	\$0	\$
2. Excess Claim Fees				
Each claim over 20 (including Reissues)				
<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>		
<u>15</u>	<u>0</u>	<u>\$52</u>	<u>x</u>	<u>=</u> \$
Each independent claim over 3 (including Reissues)				
<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>		
<u>2</u>	<u>0</u>	<u>\$220</u>	<u>x</u>	<u>=</u> \$
Multiple dependent claims				\$
3. Application Size Fee (over 100 sheets)				
<u>Total sheets</u>	<u>Extra sheets</u>	<u>Number of each addtl 50 (round up to whole #)</u>	<u>Fee (\$)</u>	
<u>-100 =</u>	<u>/50 =</u>	<u>x</u>	<u>\$270</u>	<u>=</u> \$
4. Petition for Extension of Time Fees				
Two months (37 CFR 1.17(a)(2))				\$490.00
5. Other fee(s)				
				\$
				\$
TOTAL FEES				\$490.00

Name (Print/Type)	Timothy M. Morella	Registration No. 45,277	Telephone (630) 527-4660
Signature			Date February 9, 2009

02/17/2009 EFLORES 00000016 501873 10587318
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FEE CALCULATION

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2. Excess Claim Fees

Each claim over 20 (including Reissues)

Total Claims		Extra Claims		Fee (\$)		
15	-20 or HP=	0	x	\$52	=	\$

Each independent claim over 3 (including Reissues)

Indep. Claims		Extra Claims		Fee (\$)		
2	-3 of HP=	0	x	\$220	=	\$

Multiple dependent claims \$390 \$

3. Application Size Fee (over 100 sheets)

Total sheets	Extra sheets	Number of each addtl 50 (round up to whole #)	Fee (\$)		
-100 =	/50 =	x	\$270	=	\$

4. Petition for Extension of Time Fees

Two months (37 CFR 1.17(a)(2)) \$490.00

5. Other fee(s)

\$
\$

TOTAL FEES

\$490.00

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